



January 2006

Summary Briefing on the Office of Health Care Access State Planning Grants Survey Results

The Office of Health Care Access (OHCA) has received federal HRSA State Planning Grant funds annually since 2001 to examine the issue of the uninsured and to assist in planning for insurance coverage options. As part of its planning grant efforts, OHCA conducted separate statewide household and employer telephone surveys in 2001 and 2004. These surveys provided information about the state's population, including insurance coverage status, duration of uninsurance, demographic details and availability of employer based coverage and defined both the magnitude and characteristics of the uninsured.

Below are highlights from OHCA's surveys. More detailed analyses and an explanation of the survey methodologies can be obtained from OHCA's website: www.ct.gov/ohca.

Access to coverage:

- Most Connecticut residents (94.2%) have health insurance with 68.1% covered by private health insurance and 26.1% covered by government health insurance.
- The portion of uninsured residents remained relatively stable, moving from 5.6% in 2001 to 5.8% in 2004.
- Those covered by employment-based health insurance declined from 66% in 2001 to 64% in 2004.
- While an estimated 19,300 (2%) children remained uninsured in 2004, three quarters of all Connecticut children obtained coverage through a parent or guardian's employer.
- An estimated 196,200 (5.8%) of Connecticut residents were uninsured at the time of the 2004 household survey, an estimated 114, 650 of whom were working.
- About 128,200 (3.8 %) people were *continuously* uninsured for the entire 12 months preceding the survey.
- Approximately 318,300 (9.4%) people reported being uninsured at some point during that 12 month period.

Demographic picture of the uninsured:

- Two-thirds of all uninsured adults (19 to 64 years) were employed.
- Nearly sixty percent of the uninsured had family incomes under \$35,000.
- The uninsured tended to be adults more than two-thirds were between 19 and 44 years of age, with 45 percent between 19 and 34.
- Minorities were more than three times as likely to be uninsured than non-Hispanic whites, with Hispanics comprising 40% of the uninsured.

Strong system of employment-based coverage:

- Two-thirds of Connecticut residents had employer-sponsored insurance.
- Most Connecticut firms offered health benefits to employees and over half offered employee and dependent coverage.
- Employers paid, on average, nearly 80% of the entire premium for employee only coverage and 64% for dependent coverage.

Since the 2004 survey findings revealed that a high percentage of uninsured people and Medicaid recipients were working and might have access to employer sponsored coverage, OHCA recently conducted more focused surveys in 2005¹. By surveying working families and their employers, OHCA has learned more about their access to employer-sponsored coverage as well as the issues employers face in providing health coverage. Access, affordability and cost all affect the offer of and take-up of ESI and each of these issues emerged from the analysis of the 2005 survey data and are highlighted below².

Access:

For working families with HUSKY insurance:

- Heads of household were predominately women (91%); and disproportionately single (41%), thus access to coverage through a spouse may be less available.
- Half work 35 or more hours per week, with a large number employed in service or retail jobs (75%).
- Many hold permanent positions and more than 50% have worked in the same job for two or more years.
- Nearly two-thirds of working heads of HUSKY households reported that coverage was offered by their employer. Over one third of working heads of HUSKY households reported having employer based coverage, either through their own employer or their spouse's employer.

For employers with employees whose families use HUSKY insurance:

- About 76% of employers surveyed offered some type of coverage, with 67% offering family coverage.
- On average, employers reported 74% of employees were eligible for offered coverage, with an average waiting period of three months or less.

Affordability and Cost:

- For those who were offered insurance, affordability was the main barrier to take-up of employer sponsored coverage. Forty-four percent of the employed people who did not take-up the employer coverage offered to them cited cost as the main reason.
- Employers stated that employees that did not enroll in employer coverage either had coverage elsewhere or did not enroll due to cost.
- On average, employers paid 77% of employee only premiums and 70% of family premiums.
- The average employee share of the monthly premium for single and family coverage was \$72 and \$230, respectively.

The survey results show that many low-income workers have access to insurance coverage through their employer and that cost may be deterring employees and their families from enrolling in employment based coverage.

¹ The University of Connecticut, Department of Public Policy's Center for Survey Research and Analysis conducted four telephone surveys on behalf of OHCA and DSS, which yielded:

^{• 1,000} interviews of HUSKY A & B households, 760 of whom are currently working.

^{• 400} interviews of randomly selected low income households (less than 300% of FPL).

 ⁴⁰² completed interviews of employers with a significant number of employees who use HUSKY insurance.

 ⁴⁰¹ completed interviews of employers from the same industries who do not have a significant number of employees who use HUSKY insurance.

² More detailed analyses and description of the survey methodologies will be provided in OHCA's upcoming publication, *Databook: Working HUSKY Families and their Employers*.